

Local Outreach to Suicide Survivors

Support for the Bereaved through an **A**ctive **P**ostvention **M**odel

KNOW THE SIGNS



Funded by counties through the voter-approved Mental Health Services Act (Prop. 63).

This training is part of statewide efforts to prevent suicide, reduce stigma and discrimination related to mental illness, and to promote the mental health and wellness of students. These initiatives are funded by counties through the Mental Health Services Act (Prop 63) and administered by the California Mental Health Services Authority (CaIMHSA), an organization of county governments working to improve mental health outcomes for individuals, families and communities.



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Special thanks to:

Dr. Frank Campbell, Dr. Dequincy Lezine, Carla Sawyer, Patrick Power, and Lindsey Whitaker

Workshop Outline



- Postvention *is* Prevention
- Global, National, & State Strategic Plans
- Crisis Coping Theory
- The Continuum of Survivorship
- The Aftermath of Suicide
- Passive & Delayed Postvention Models
- LOSS Team: Active Postvention Model
- What Do I Do?
- Question Exploration
- References

Postvention *is* Prevention

“Postvention” is a term used to describe the range of timely, coordinated, and appropriate activities following a suicide, that are designed to provide support to loss survivors and to prevent suicide contagion.

- After Rural Suicide:
A Guide for Coordinated Community Postvention Response



Jan Mills
© 1978

**“Postvention is prevention
for the next generation.”**

- Edwin Shneidman Ph.D. (1972)



Global, National, & State Strategic Plans



Preventing suicide

A global imperative



World Health
Organization

FOREWORD



“Unfortunately, suicide all too often fails to be prioritized as a major public health problem.”

Every suicide is a tragedy. It is estimated that over 800 000 people die by suicide and that there are many suicide attempts for each death. The impact on families, friends and communities is devastating and far-reaching, even long after persons dear to them have taken their own lives.

Unfortunately, suicide all too often fails to be prioritized as a major public health problem. Despite an increase in research and knowledge about suicide and its prevention, the taboo and stigma surrounding suicide persist and often people do not seek help or are left alone. And if they do seek help, many health systems and services fail to provide timely and effective help.

<https://www.who.int/publications/i/item/9789241564779>

World Health Organization: Practice Achievements

- 1. Utilization of non-specialized health professionals** - involving non-specialized health workers.
- 2. Self-help groups:** for survivors of suicide attempts and those bereaved by suicide
- 3. Trained volunteers:** important contribution in supporting people during suicidal crises

2012 National Strategy for Suicide Prevention: GOALS AND OBJECTIVES FOR ACTION

A report of the U.S. Surgeon General
and of the National Action Alliance for Suicide Prevention

As the Surgeon General, I want to help make Americans aware of the heavy burden suicide imposes on our nation, and more importantly, do everything I can to help reduce the toll that suicide takes on America. That is what this document is all about.

No matter where we live or what we do every day, each of us has a role in preventing suicide. Our actions can make a difference. While a document alone will not prevent a single suicide, I hope that this document will help spur and leverage all of our actions so we can make real progress now in preventing suicide. We have no time to waste.

Regina M. Benjamin, MD, MBA
VADM, U.S. Public Health Service
Surgeon General

“As the Surgeon General, I want to help make Americans aware of the heavy burden suicide imposes on our nation, and more importantly, do everything I can to help reduce the toll that suicide takes on America. That is what this document is all about.”

https://www.ncbi.nlm.nih.gov/books/NBK109917/pdf/Bookshelf_NBK109917.pdf

National Strategy for Suicide Prevention

Goal 10. Provide care and support to individuals affected by suicide deaths and attempts to promote healing and implement community strategies to help prevent further suicides.

National Strategy for Suicide Prevention

Objective 10.1: Develop guidelines for effective **comprehensive support programs** for individuals bereaved by suicide and promote the full implementation of these guidelines at the state/territorial, tribal, and community levels.

Objective 10.2: Provide **appropriate clinical care** to individuals affected by a **suicide attempt or bereaved by suicide**, including trauma treatment and care for complicated grief.

National Strategy for Suicide Prevention

Objective 10.3: Engage suicide attempt survivors in suicide prevention planning, including support services, treatment, community suicide prevention education, and the development of guidelines and protocols for suicide attempt survivor support groups.

Objective 10.4: Adopt, disseminate, implement, and evaluate guidelines for communities to respond effectively to suicide clusters and contagion within their cultural context, and support implementation with education, training, and consultation.



Striving for Zero

CALIFORNIA'S STRATEGIC PLAN FOR SUICIDE PREVENTION 2020 – 2025

Support for people at risk of suicide or those supporting people at risk is available by calling the **National Suicide Prevention Lifeline** 1-800-273-TALK (8255)

Apoyo y ayuda para personas a riesgo de suicidarse o para las personas que los apoyan está disponible llamando al **National Suicide Prevention Lifeline** 888-682-9454



STRATEGIC AIM 1: ESTABLISH A SUICIDE PREVENTION INFRASTRUCTURE



1
STRATEGIC
AIM

GOAL 1: ENHANCE VISIBLE LEADERSHIP AND NETWORKED PARTNERSHIPS

Desired Outcome ☑ Increased awareness and sustainability of suicide as a preventable public health priority.

Short-term Target 🎯 By 2025, state leadership is advancing suicide prevention as a public health priority, and all counties have leaders and coalitions engaged in suicide prevention efforts.

State Objectives

Objective 1a Establish centralized, visible state-level leadership by creating the Office of Suicide Prevention within the California Department of Public Health to provide strategic guidance, deliver technical assistance, develop and coordinate trainings, monitor data, conduct state-level evaluation, and disseminate information to advance statewide progress.

Objective 1b Engage private and public partners by creating the California Suicide Prevention Council to advance suicide prevention efforts with strategic planning and dissemination of best practices in their respective sectors.

Local and Regional Objectives

Objective 1c Establish leadership to provide clear direction for suicide prevention efforts and prioritize goals with maximal impact. Suicide prevention leadership may come from a coalition, a task force, or from health, mental health, and substance use disorder agencies or organizations.

Objective 1d Identify leaders who can champion suicide prevention as a public health priority. Leaders drive progress, develop and sustain relationships with partners, and help focus attention on suicide prevention as a core mission when faced with competing priorities.

Objective 1e Hold regularly scheduled meetings to convene stakeholders, prioritize suicide prevention activities based on data and community input, leverage resources to build capacity across systems and communities regionally, and expand services based on effectiveness.

Objective 1f Formalize a coalition of private and public partners to advance suicide prevention efforts by being an "action arm" to local and regional leaders.²¹ Private and public leaders should be brought together to leverage their influence to champion efforts prioritized in their own sectors.²² Within coalitions, sector-specific or strategy-specific subgroups should be created to focus expertise and keep members energized and engaged.²³ Consistent logistical support, strategic guidance, technical assistance and other infrastructure should be provided to the coalition by local leadership.²⁴

California's Strategic Plan for Suicide Prevention

Strategic Aim 4: Improve suicide-related services and supports.

Desired Outcome: Reduce the amount of time between a suicide loss and access to bereavement services specifically designed to meet the needs of suicide loss survivors.

Goal 12: Expand support services following a suicide loss.

California's Strategic Plan for Suicide Prevention

Goal 12: Expand support services following a suicide loss.

Objective 12d: Develop an integrated postvention services plan to guide delivery of best practices following a suicide loss. The plan should tailor strategies to settings and cultures, including schools, workplaces, faith communities, hospitals and health care settings, tribal communities, and correctional facilities. The plan should identify a lead agency or organization responsible for ensuring adequate capacity, training, and effectiveness in the delivery of activities that support survivors, service providers, and community members after a suicide loss. Enter into agreements that contain clearly defined roles and procedures to increase the effectiveness of coordinated responses, such as procedures for sharing private information and data based on the role of each provider.

- Resources to guide creation of a community postvention response can be found here:

- <https://www.cibhs.org/pod/after-rural-suicide>

California's Strategic Plan for Suicide Prevention

Goal 12: Expand support services following a suicide loss.

Objective 12i: Enter into memorandums of understanding with coroners and medical examiners to establish coordinated, timely, and respectful responses following a suicide loss, and establish policies and protocols to govern activities in the event of a suicide. Components should include how information is shared, and with whom, and how the privacy of families is respected, including a process for determining how and when to reach out to family members with resources and support. This strategy includes people who die by suicide in correctional or hospital settings.

California's Strategic Plan for Suicide Prevention

Goal 12: Expand support services following a suicide loss.

Objective 12e: Develop an online bereavement toolkit consisting of community-specific resources. Partner with hospitals, first responders, funeral directors, faith-based communities, and coroners and medical examiners to distribute the toolkit in print or via web links.

Resources to support funeral directors' participation in this strategy can be found here:

<https://www.sprc.org/resources-programs/supporting-survivors-suicide-loss-guide-funeral-directors-2nd-ed>

California's Strategic Plan for Suicide Prevention

Goal 12: Expand support services following a suicide loss.

Objective 12f: Provide training to first responders, crisis service providers, and access line responders on best practices in supporting suicide loss survivors, from understanding their unique needs to helping them access resources.

California's Strategic Plan for Suicide Prevention

Goal 12: Expand support services following a suicide loss.

Objective 12g: Create local suicide bereavement support programs or expand capacity and sustainability of existing programs using *Pathways to Purpose and Hope*, found at

<https://emmresourcecenter.org/resources/pathways-purpose-and-hope-guide-creating-sustainable-suicide-bereavement-support-program>

California's Strategic Plan for Suicide Prevention

Goal 12: Expand support services following a suicide loss.

Objective 12h: Expand support services designed and facilitated by survivors of suicide loss. Train survivors of suicide loss to speak safely and effectively about their loss and create a local speakers bureau to give a forum for survivors to deliver suicide prevention messaging to the public. Provide training for suicide loss survivor service facilitators and create opportunities for service facilitators to support each other, including group debrief sessions.

Speaking Out About Suicide - by the American Foundation for Suicide Prevention:
<https://www.datocms-assets.com/12810/1584538255-13739afspspeakingoutaboutsucideflyerm1.pdf>

Building Hope and Resiliency

A Collaborative Approach to Suicide Prevention in Riverside County



WWW.RIVCOSPC.ORG

Recommendations

- Develop community postvention plan and implement postvention team(s) to coordinate effective response at various levels and across multiple settings.
- Implement and expand survivor's support groups into systems of care to address immediate, delayed and ongoing supports.

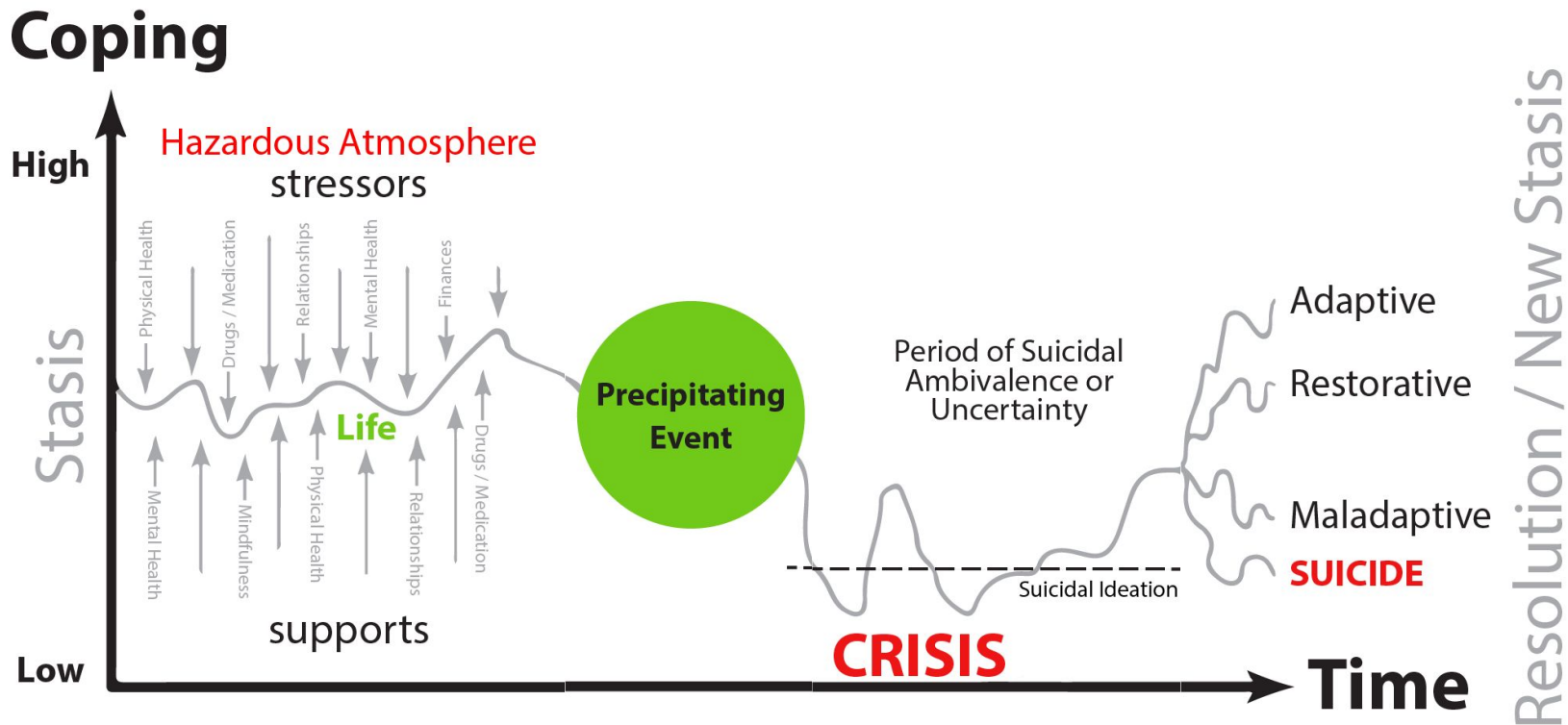
Riverside's Strategic Plan for Suicide Prevention

Currently in Place

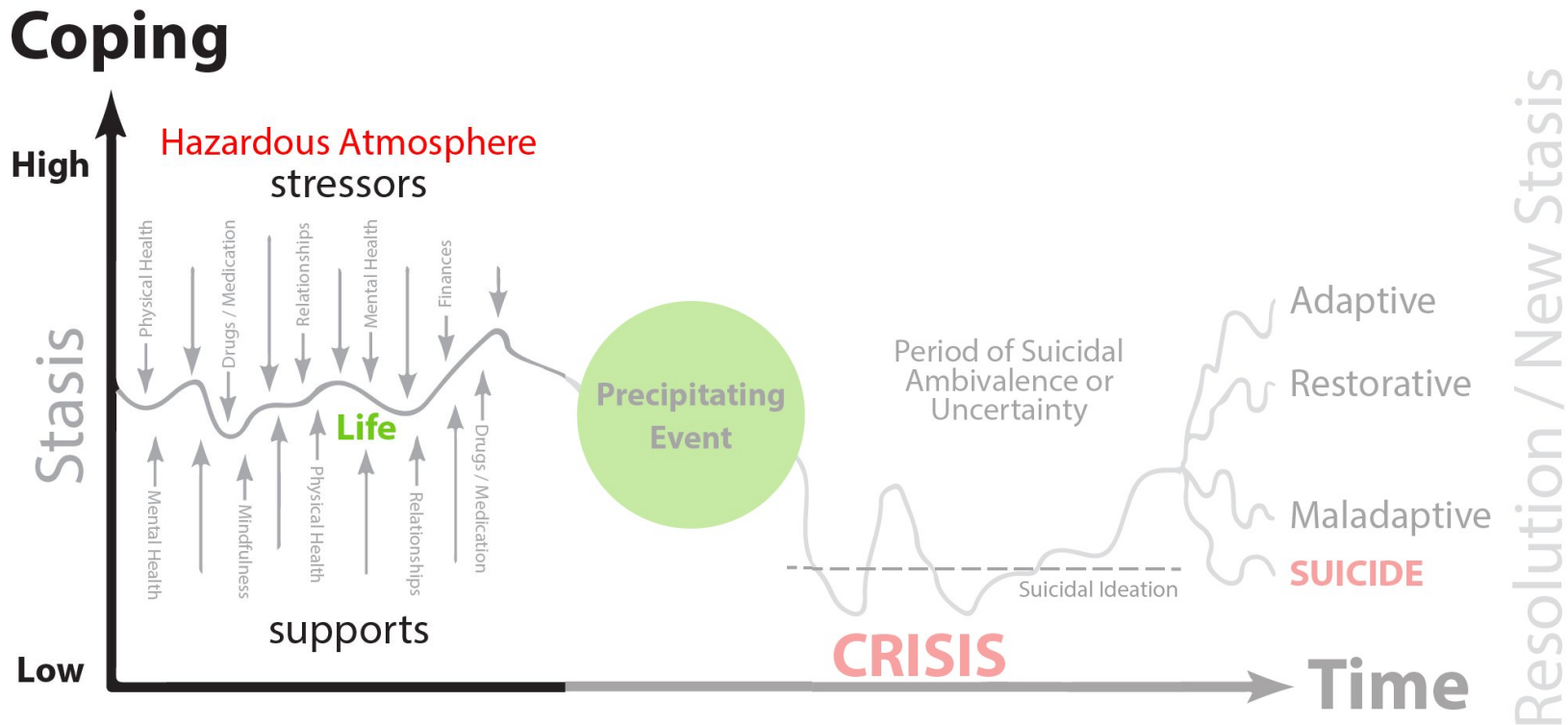
Through resource mapping in Riverside County's stakeholder process, there was a clear lack of postvention services throughout the county. Through resource mapping, a suicide loss survivor support group was identified as well as a Trauma Intervention Program (TIP), primarily located in the Mid-County region. Currently, Riverside County does not have a peer-led suicide loss team. Postvention efforts in Riverside County should be a primary area of focus in order to work toward reducing suicides, as research has found that survivors of suicide are at an increased risk of suicide themselves.

Crisis Coping Theory

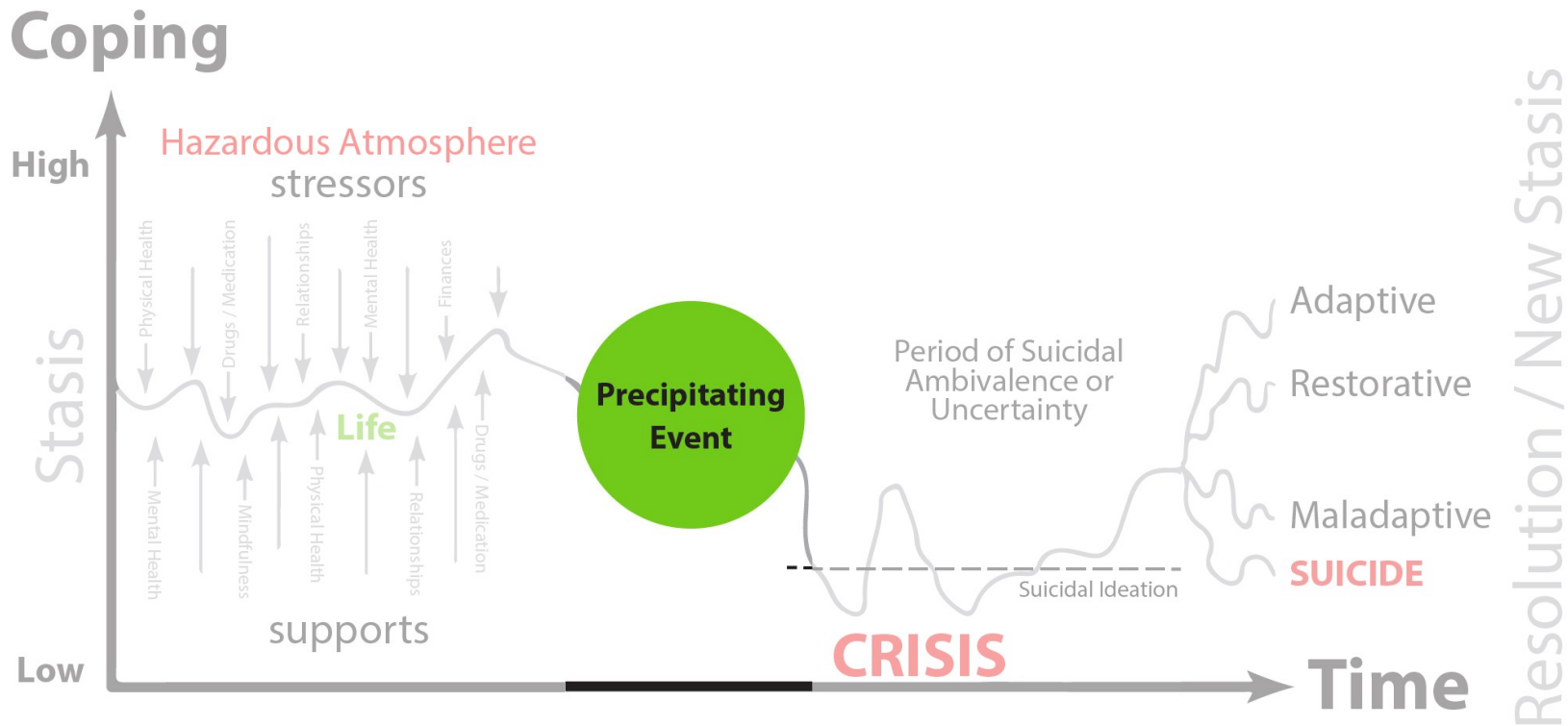
Crisis Coping Theory



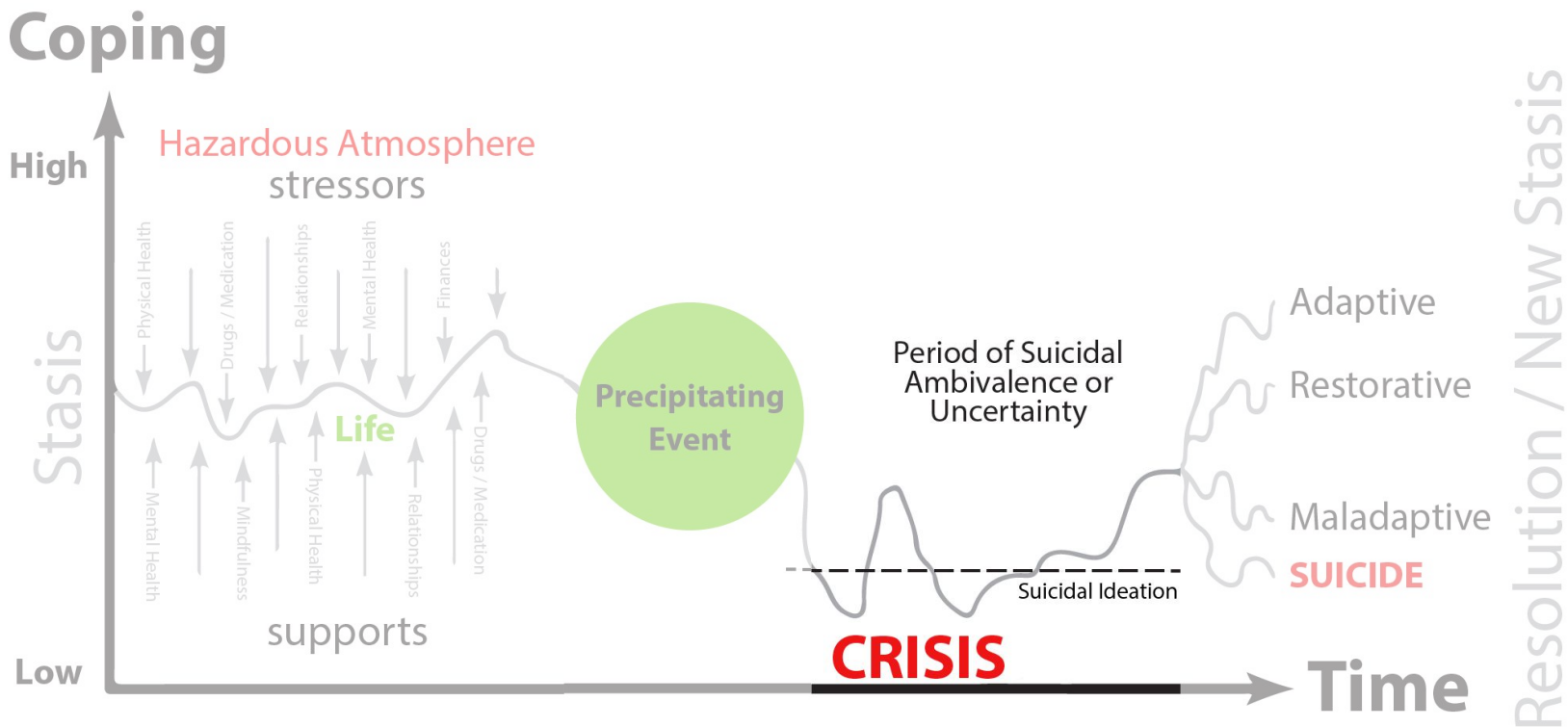
Crisis Coping Theory



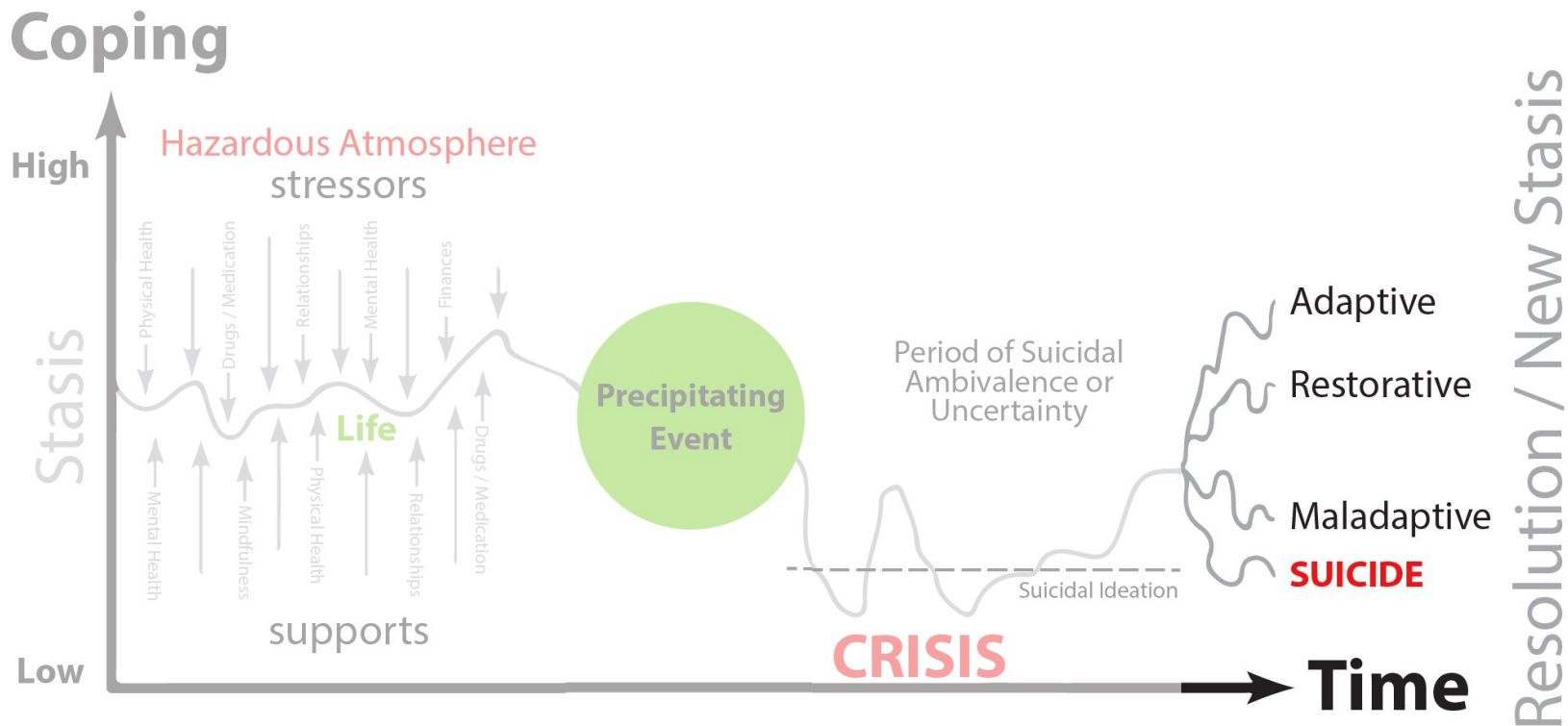
Crisis Coping Theory



Crisis Coping Theory



Crisis Coping Theory



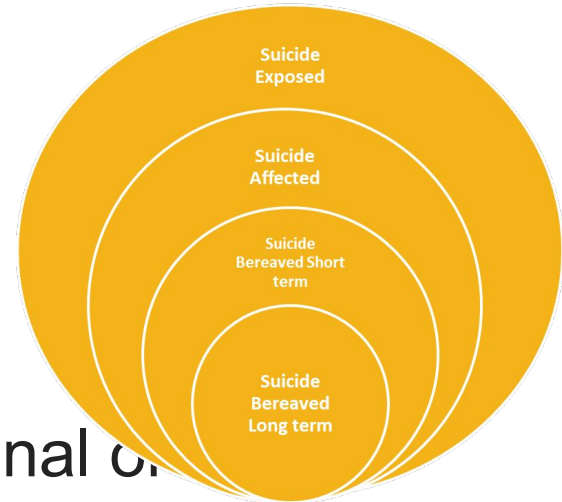
The Continuum of Survivorship

The Continuum of Survivorship



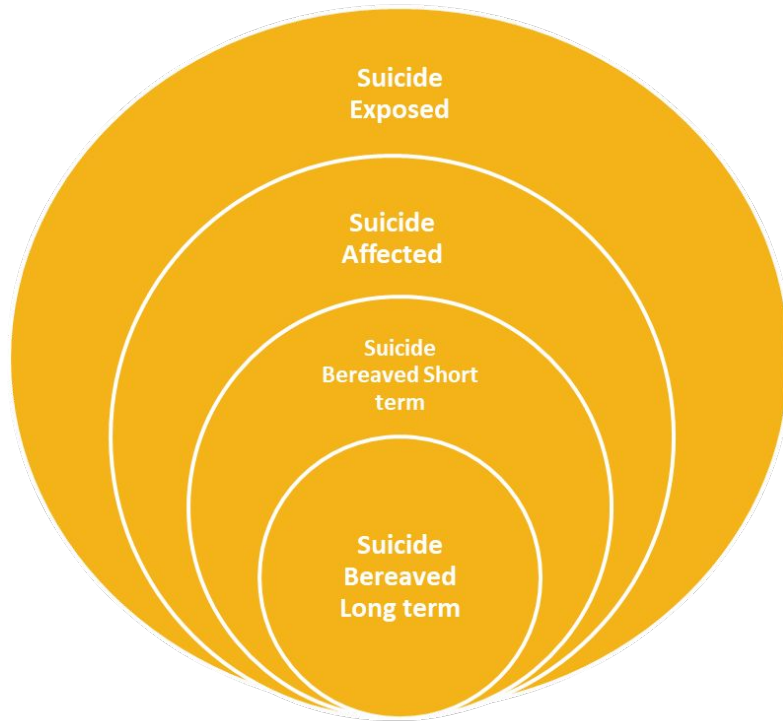
The Continuum of Survivorship

- **Exposed** - anyone who intersects with the decedent
- **Affected** - exposed who need additional support
- **Suicide bereaved short-term** - personal or close relationship and a typical grief experience
- **Suicide bereaved long-term** - those who experience profound trauma or complicated grief due to the loss and the disruption is likely to last more than a year



The Aftermath of Suicide

The Aftermath of Suicide Exposure



- It is estimated that **50% of the population will be exposed to the suicide of someone they know** at some point in their life.
- **An average of 115 people are exposed when a suicide occurs.** Of these, 63 will identify as having a high or very high level of closeness with the person.
- On average, 25 people will have their lives impacted in a major way, and **a suicide will have a devastating impact on the 11 people** closest to the person.

Source: Responding to Grief, Trauma, and Distress After a Suicide: U.S. National Guidelines

The Aftermath of Suicide Exposure



- Exposure to the suicide death of a family member doubles or triples the risk that another person in that family will die by suicide
 - Men who have lost a spouse to suicide have a **46-fold increase** in risk
 - Men who have lost an adult sibling to suicide have a **doubled risk**
 - Women who have lost an adult sibling to suicide have a **tripled risk**
- Exposure to suicide doubles the chances that a survivor will report suicidal ideation, when compared to people who were not exposed to a suicide.
- Exposure to suicide increases the risk of suicidal ideation of family members or friends.
- Elevated rates of suicidal ideation are detected in parents bereaved by suicide as many as 10 years after the death.

Sources: Responding to Grief, Trauma, and Distress After a Suicide: U.S. National Guidelines;

John R. Jordan (2017) Postvention is prevention—The case for suicide postvention, Death Studies, 41:10, 614-621



TRAUMA

The Aftermath of Suicide Exposure

Uniqueness of suicide loss:

- Suicide is a singular event
- It brings to question the state of mind of the decedent and whether it was free choice or coerced (by voices or other external factors) - Why? This can become a central focus in a grief journey.
- Suicide is preventable - - if it is, why wasn't my loved one's death prevented, who is at fault? Shame, blame and guilt.

The Aftermath of Suicide Exposure

Uniqueness of suicide loss:

- Stigma (internal & external) - illegal, sinful, weak character - can lead to less help-seeking for survivors
- Traumatic - psychological, direct (exposure), or imagined
- Tends to be sudden and unexpected even if the decedent had multiple prior attempts
- Feelings of abandonment
- Fear of contagion & an increased risk
- Relief

The Aftermath of Suicide Exposure

A Significant and profound increases in suicide risk:

- Greater rates of bipolar disorder in persons exposed to the suicide of a parent
 - Tsuchiya, Agerbo, & Mortensen, 2005
- Greater depression across all kinship losses
 - Kessing, Agerbo, & Mortensen, 2003
- Greater depression in adolescent and young adult friends losing a peer
 - Brent, Moritz, Bridge, Perper, & Canobbio, 1996b

Aftermath of Suicide

- Greater depression in bereaved mothers
 - Brent, Moritz, Bridge, Perper, & Canobbio, 1996a
- Greater depression and substance abuse in youth losing a parent
 - Brent, Melhem, Donohoe, & Walker, 2009
- Greater psychiatric morbidity in elderly parents losing a child
 - Clarke & Wrigley, 2004

Aftermath of Suicide

- Greater psychiatric morbidity in elderly parents losing a child
 - Clarke & Wrigley, 2004
- Greater rates of complicated grief disorder
 - Bailey, Kral, & Dunham, 1999; Holland & Neimeyer, 2011; Melhem et al., 2004b
- Greater mental health symptoms and social isolation in surviving spouses 10 years after a loss
 - Saarinen et al., 2002

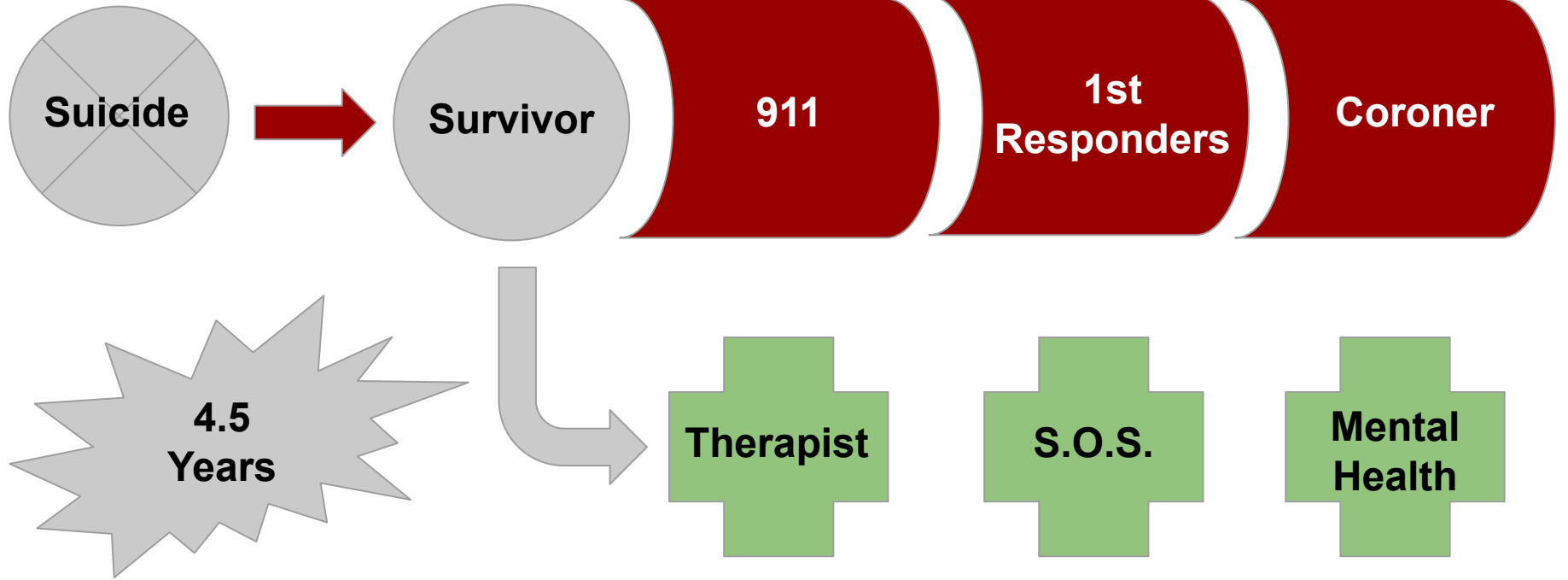
Aftermath of Suicide

- Poorer self-ratings of mental health and greater depression and suicidal ideation in bereaved mothers and fathers five or more years after the death of a child when compared to a non-bereaved national sample. The lowered ratings of mental health and depression persisted for more than 10 years for the bereaved mothers
 - Feigelman et al., 2012
- Greater social strain and stigmatization within the social networks of loss survivors
 - Cvinar, 2005; Feigelman et al., 2009; Feigelman et al., 2012

Legacy Issues for Adult Children of Suicide

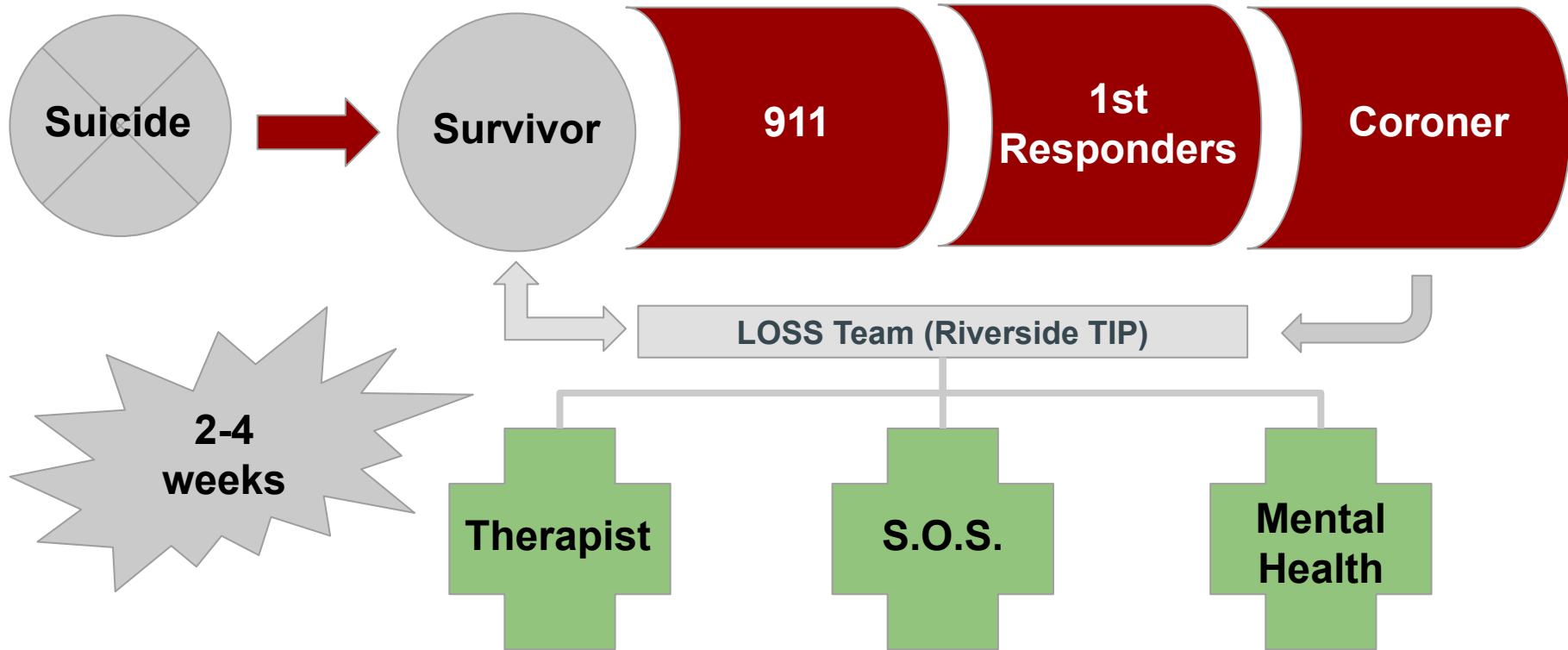
- Often referred as adults from a treatment program “to look into that suicide of their dad or mom when they were a child” - ACEs
- Alcohol, Drugs, Relationship issues, and Work problems
- Trust issues and foreshortened future
- Hyper mature when young, prolonged adolescent behavior as adults
- Milestones - birthdays, graduation, and age of death

Passive & Delayed Postvention Models



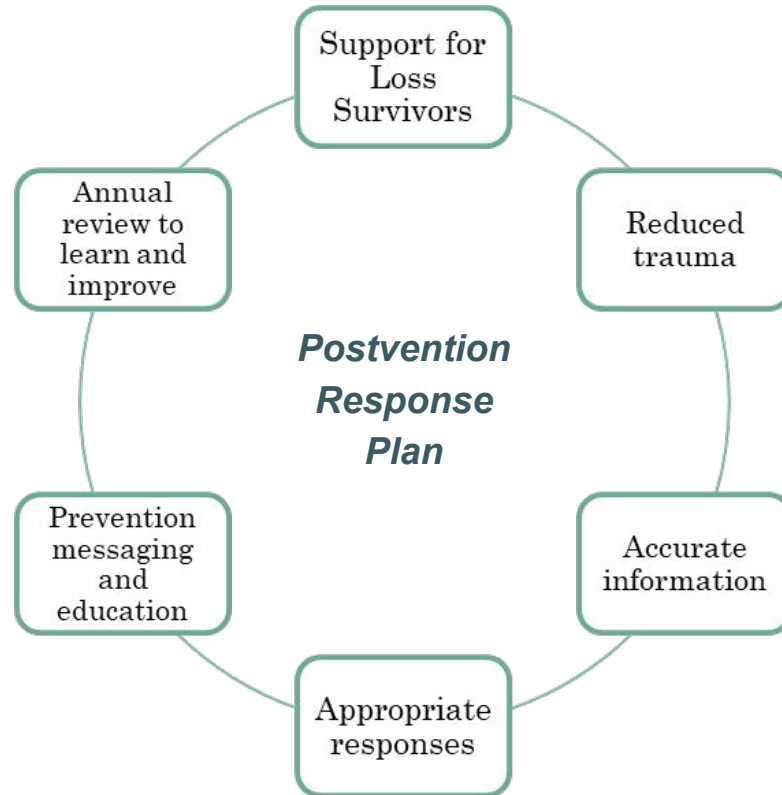
**LOSS Team:
Active Postvention Model**





What Do I Do?

After Rural Suicide: elements of a community response plan



After Rural Suicide: A Guide for Coordinated Community Postvention Response

- Support healing of the individuals affected (loss survivors) and of the community at large;
- Offer support to at-risk individuals and reduce the likelihood of additional attempts or deaths (contagion);
- Help individuals and organizations respond promptly and appropriately;
- Offer messaging and activities to help educate the community about suicide prevention.

Potential Community Strategies

- Support groups specializing in suicide loss and bereavement offered in languages that meet communities' needs
- Create events and other ways for individuals and families to engage in a support network





Potential Community Strategies

- Clinicians who have special training in suicide related bereavement and are known in the community
- Develop integrated postvention plans that guide response after a suicide death in communities and key settings, such as schools and workplaces. Postvention plans should include response teams that aid in reducing time between suicide related death and resources given to survivors

Grief After Suicide

Finding Hope and Healing

A workshop geared towards people who are grieving the loss of loved ones to suicide, and to those who wish to support grieving loss survivors.

Session 1 - OR - Session 2

Date: June 27th 2016

Time: 6p.m. - 8p.m.

Location: Kings County Behavioral Health
- Hope Conference Room
460 Kings County
Drive, Suite 101,
Hanford, CA 93230

Date: June 29th 2016

Time: 6p.m. - 8p.m.

Location: Porterville City Hall -
City Council Chambers
291 North
Main Street,
Porterville, CA 93257

Reserve your ticket:
www.sptf.org/healing

• open to the public •



John (Jack) Jordan is a licensed psychologist in private practice in Pawtucket, Rhode Island where he has specialized in work with survivors of suicide and other traumatic losses for more than 35 years. He is the Clinical Consultant for Grief Support Services of the Samaritans in Boston, Massachusetts, and the Professional Advisor to the Survivor Council of the American Foundation for Suicide Prevention (AFSP).



Potential Community Strategies


- Increase the number of clinicians, counselors, and providers that are skilled and trained in offering suicide bereavement services and create a directory to facilitate the ability of loss survivors to connect with skilled providers
- Increase awareness of and access to existing survivors of suicide loss support groups and resources


A close-up photograph of a sunflower head, showing the bright yellow petals and the green sepals. The background is softly blurred, creating a warm, golden glow.

Survivors of Suicide Loss Peer Support Group

Have you lost a friend, family member, loved one, or someone close to suicide? Join our peer support group to help cope with the ever-changing mix of emotions we must grapple with after losing someone to suicide.


HANFORD


 5:30 p.m. - 7:00 p.m.


 1st Thursday of each month


 460 Kings County Dr., Suite 101
Hanford, CA 93230

VISALIA

 6:30 p.m. - 8:00 p.m.

 3rd Thursday of each month

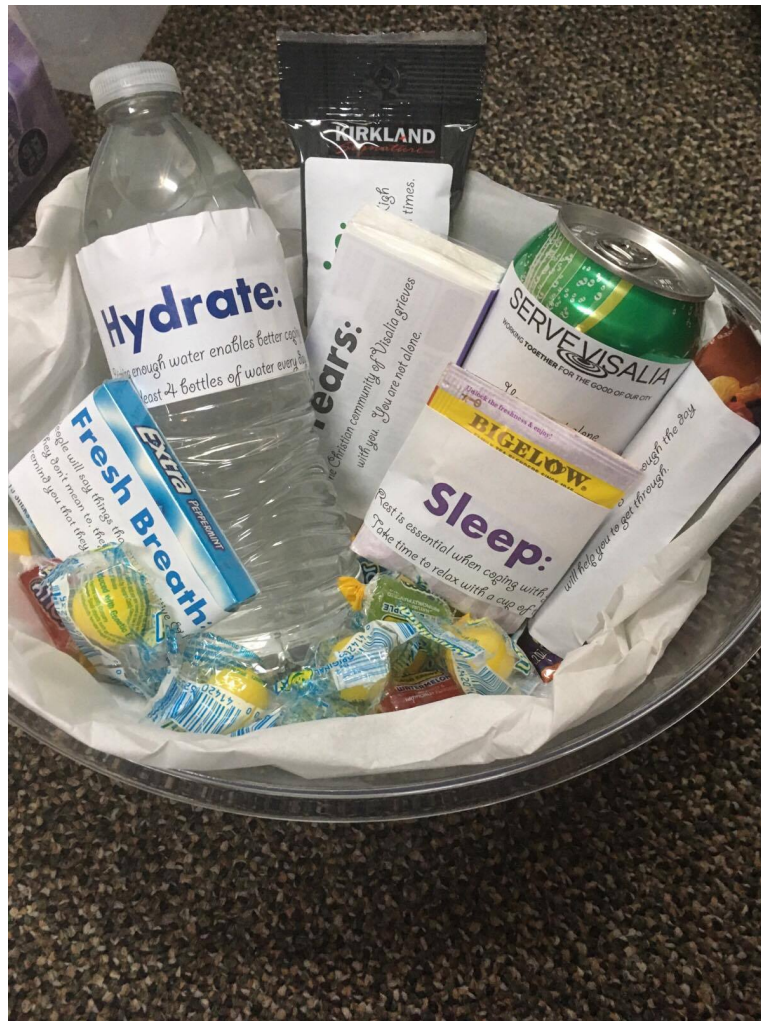
 210 West Center Ave.
Visalia, CA 93291

 www.sptf.org/sos



Organizations Responding to Loss

- Approach the situation with compassion
- Listen & connect to their unique needs
- Treat responses to loss equitably
- Connect with experts
- Learn resources
- Get involved



Organizations Responding to Loss

- Develop policies or guidelines to direct future action
- Embrace your HR policies
 - EAP or similar programs & specialty training
- Phase-based actions: Acute, Recovery, Reconstructing



ATTENTION
Division of
Required at
times
Participation



Organizations Responding to Loss: Acute Phase

Immediate Response

- **Coordinate:** Contain the crisis.
- **Notify:** Protect and respect the privacy rights of the deceased employee and their loved ones during death notification.
- **Communicate:** Reduce the potential for contagion.
- **Support:** Offer practical assistance to family.

Organizations Responding to Loss: Recovery Phase

Short-term Response

- **Link:** Identify and link impacted employees to additional support resources and refer those most affected to professional mental health services.
- **Comfort:** Support, comfort, and promote healthy grieving of the employees who have been impacted by the loss.
- **Restore:** Restore equilibrium and optimal functioning in the workplace.
- **Lead:** Build and sustain trust and confidence in organizational leadership.

Organizations Responding to Loss: Reconstructing Phase

Longer-term Response:

- **Honor:** Prepare for anniversary reactions and other milestone dates.
- **Sustain:** Transition postvention to suicide prevention.



Resources Make a Difference

- Peer Support Group
- Partnerships & Relationships
- Individual and/or family counseling
- Bibliotherapy (reading)
- Websites
- Events
- Artifacts!!!

Example Resources



ABOUT KNOW THE SIGNS FIND THE WORDS REACH OUT GET INVOLVED GET TRAINED SUB-COMMITTEES DATA CONTACT US

Search

english



**In A Crisis?
Need Support?**

National Suicide Prevention Lifeline
(800) 273-8255 or 988

Crisis Text Line
Text HOME to 741741

Inland SoCal Crisis & Suicide Helpline
(951) 686 HELP (4357)



About the
Coalition



Strategic Plan



Sub-
Committees



Resources



Data



Trainings

www.rivcospc.org

Example Resources

- It's UP 2 US: Riverside - website
 - <https://up2riverside.org/resources/after-a-suicide/>
- LOSSteam - foundation of LOSS & APM
 - <https://www.lossteam.com/>
- Alliance of Hope for Suicide Loss Survivors - website
 - <https://allianceofhope.org/>
- Friends for Survival - website
 - <https://friendsforsurvival.org/>
- Touched by Suicide: Hope and Healing After Loss - book
 - <https://a.co/d/hY9WiYl>
- *VOICES of HEALING and HOPE* - book
 - <http://www.irisbolton.com/order.html>
- Why People Die by Suicide - book
 - <https://a.co/d/5gNzMBN>
- After Suicide Loss: Coping with Your Grief, 2nd Edition - book
 - <https://a.co/d/9Wi8xH8>

**“I’ve learned that people will forget
what you said, people will forget what
you did, but people will never forget
how you made them feel.”**

- Maya Angelou



Brooke Crain's
Suicide Awareness Tribute



Question Exploration

References

- Supporting Survivors of Suicide Loss: A Guide for Funeral Directors (2nd ed.)
 - <https://www.sprc.org/resources-programs/supporting-survivors-suicide-loss-guide-funeral-directors-2nd-ed>
- Responding to Grief, Trauma, and Distress After a Suicide: U.S. National Guidelines
 - <https://sprc.org/sites/default/files/migrate/library/RespondingAfterSuicideNationalGuidelines.pdf>
- How to Launch a Local Outreach to Suicide Survivors (LOSS) Team
 - <https://www.denisemeinegraham.com/postvention-and-loss-teams>
- Best Practices for Presentations by Suicide Loss and Suicide Attempt Survivors
 - [https://suicidology.org/wp-content/uploads/2019/07/Best Practices Presentations Suicide Loss Suicide Attempt Survivors.pdf](https://suicidology.org/wp-content/uploads/2019/07/Best_Practices_Presentations_Suicide_Loss_Suicide_Attempt_Survivors.pdf)
- SOS: A Handbook for Survivors of Suicide
 - https://suicidology.org/wp-content/uploads/2019/07/SOS_handbook.pdf
- A Manager's Guide to Suicide Postvention in the Workplace: 10 Action Steps for Dealing with the Aftermath of Suicide
 - <https://theactionalliance.org/sites/default/files/managers-guidebook-to-suicide-postvention-workshop.pdf>

References

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- 2012 National Strategy for Suicide Prevention: Goals and Objectives for Action:
 - https://www.ncbi.nlm.nih.gov/books/NBK109917/pdf/Bookshelf_NBK109917.pdf
- Striving for Zero: California's Strategic Plan for Suicide Prevention 2020-2025:
 - <https://mhsoac.ca.gov/newsroom/announcements/striving-for-zero-californias-strategic-plan-for-suicide-prevention-2020-2025/>
- After Rural Suicide: A Guide for Coordinated Community Postvention Response
 - <https://work.cibhs.org/pod/after-rural-suicide>
- Pathways to Purpose and Hope: Creating a Sustainable Suicide Bereavement Support Program:
 - <https://work.cibhs.org/pod/after-rural-suicide>
- Speaking Out About Suicide
 - <https://www.datocms-assets.com/12810/1584538255-13739afspspeakingoutaboutsucideflyerm1.pdf>
- After a Suicide: A Toolkit for Schools 2nd Ed.
 - <https://afsp.org/after-a-suicide-a-toolkit-for-schools>
- How to Launch a Local Outreach to Suicide Survivors (LOSS) Team
 - https://www.denisemeinegraham.com/files/ugd/7167bf_25fa364f135241fb8efbdd01d3a813e0.pdf



Noah is a suicide loss survivor. He never met his grandfather who died by suicide before he was born. Then, during his senior year of high school, his father was overwhelmed by trauma and depression and also died by suicide. Noah has spent more than 15 years working in the mental health field serving individuals experiencing homelessness, substance use disorders, and severe and persistent mental illness. He has worked with numerous communities helping them to build suicide prevention, intervention, and postvention services. His greatest accomplishments are his marriage to his high school sweetheart Lindsey and their five wonderful children.

Noah J. Whitaker, MBA
Suicide Prevention Consultant

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